

CLAIMS ONLY							Application Number <span style="font-size: 1.2em;">10590723</span>		Filing Date			
							Applicant(s)					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Indep	1					
Total Depend						
Total Claims	1					

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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